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ANNUAL REPORT
OF THE
SOUTH CAROLINA VOCATIONAL
REHABILITATION DEPARTMENT
FOR FISCAL YEAR 1971-72

DILL D. BECKMAN
COMMISSIONER

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Printed Under the Direction of the
State Budget and Control Board

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LETTER OF TRANSMITTAL

The Honorable John C. West
Governor of South Carolina
State House
Columbia, South Carolina

Dear Sir:

I hereby submit to the General Assembly, through you, the annual report of the South Carolina Vocational Rehabilitation Department for the fiscal year 1972 in compliance with the 1962 Code of Laws of South Carolina, as amended.

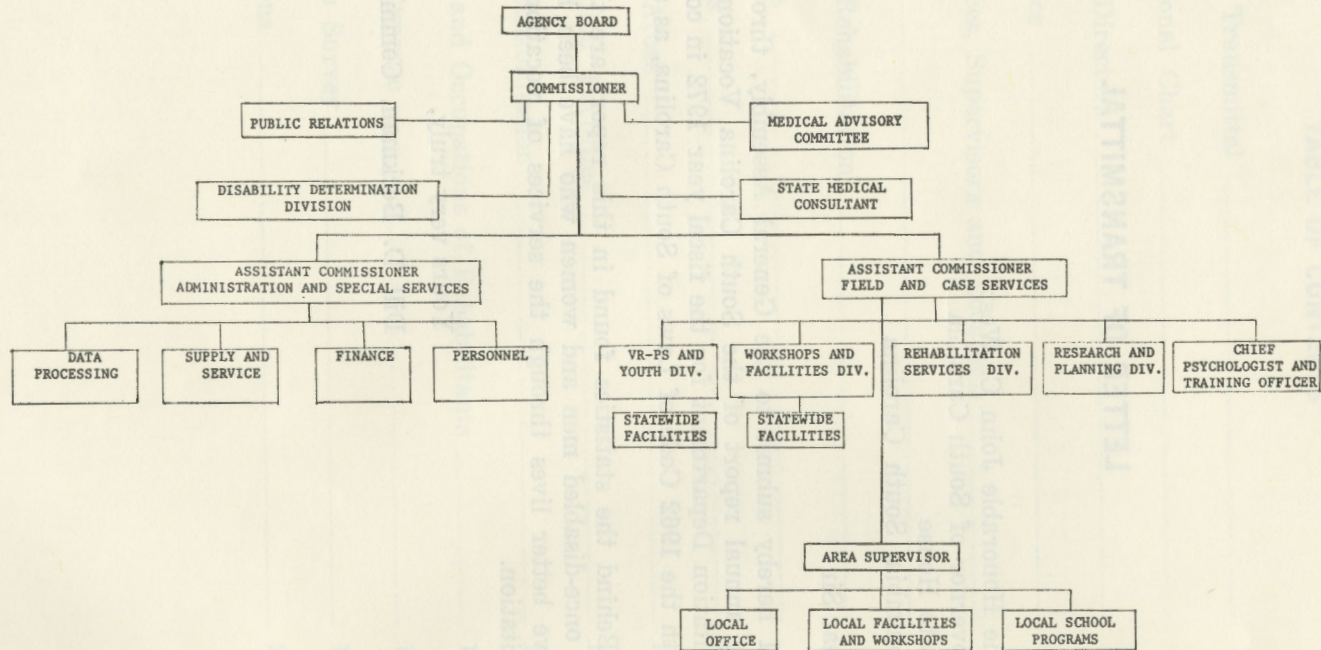
Behind the statistics found in this report are thousands of once-disabled men and women who have been helped to have better lives through the services of vocational rehabilitation.

Yours very truly,

Dill D. Beckman, Commissioner

SOUTH CAROLINA VOCATIONAL REHABILITATION DEPARTMENT

ORGANIZATIONAL CHART



BOARD OF DIRECTORS

E. Roy Stone, Jr., Greenville, Chairman

Dr. H. L. Laffitte, Allendale, Vice-Chairman

Dr. Dill D. Beckman, Columbia, Secretary

Dr. W. L. Byerly, Sr., Hartsville

Ernest H. Carroll, Rock Hill

Harry W. Findley, Anderson

Daniel E. Martin, Charleston

John A. Montgomery, Columbia

STATE OFFICE

Dr. Dill D. Beckman	Commissioner
Joe S. Dusenbury	Assistant Commissioner, Field and Case Services
T. E. Ringer, Jr.	Assistant Commissioner, Administration and Special Services
Dr. Charles S. Chandler	Supervisor, Division of Research and Planning
George L. Cleckler	Supervisor, Division of Public Schools and Youth Services
C. J. Collins	Supervisor, Division of Rehabilitation Services
James McClary	Supervisor, Division of Workshops and Facilities
B. J. Marett	Supervisor, Disability Determination Division
Dr. Ben Miller	Medical Consultant
Dr. Robert E. Brabham	Chief Psychologist and Training Officer
Allen T. Gantt	Personnel Director
Norma G. Anderson	Public Information Specialist

AREA OFFICES AND SUPERVISORS

Raymond Mizell	407 Hayne Avenue, S. W., Aiken
Robert Pettigrew	1103 North Fant St., Anderson
W. B. Creel	34 George Street, Charleston
Henry Watts	100 Main Street, Columbia
H. B. Powell, Jr.	1550 West Evans Street, Florence
R. H. Bonnette	102 Screven, Georgetown
O. D. Parker	Academy Building, 2 Hampton Ave., Greenville
W. H. Turnley	605 South Main Street, Greenwood
W. J. Chapman	418 West Carolina Ave., Hartsville
John Lybrand	396 St. Paul St., N.E., Orangeburg
George McGill	756 Cherry Road, Rock Hill
C. M. Isetts	864 N. Church Street, Spartanburg
A. L. Caughman	27 West Calhoun Street, Sumter
William Rogers	Hiers Professional Center, Walterboro

HISTORY

From a meager beginning 45 years ago, the South Carolina Vocational Rehabilitation Department has grown steadily over this period of time to become the second ranking program in the nation in the number of handicapped persons placed in gainful employment per 100,000 population. In spite of the fact that South Carolina was one of the last states to provide for the Federal-State Program of Vocational Rehabilitation, it has achieved national recognition as a leader among those concerned with the welfare of the disabled, having placed a total of 95,502 disabled persons in a wage-earning status.

Starting in 1927 with one full-time and two part-time employees, the South Carolina Vocational Rehabilitation Department has grown to 15 area offices and seven satellite offices located in population centers, and 230 counselors serve the state from these locations. Workshop and evaluation centers are also located within other state institutions, as well as near area offices. New mobile evaluation units provide service to handicapped persons living in rural areas of South Carolina. Services have been improved by setting up specialized facilities in cooperation with public and private groups and organizations. Coordinated services in special facilities are considered to be one of the main keys to enabling thousands of severely disabled to be released from economic imprisonment.

In the past decade the Department has experienced unparalleled growth, with an increase in the number of rehabilitants from 2,380 in 1962 to 10,850 in 1972. South Carolina is a leader in the rehabilitation of the mentally retarded. The Department has a Rehabilitation Evaluation Unit in each of the three state institutions for the mentally retarded. Some "firsts" for the Department include being the first state to attempt vocational rehabilitation of the mentally ill in a state hospital situation; had a rehabilitation component in the first program for alcoholics in South Carolina; installation of its own data processing system used as a management tool to bank information; the establishment of a public offender program of rehabilitation. Nationally, 34 per cent of those serving prison terms get back into trouble after release,

whereas in South Carolina the recidivism rate has been reduced to 8 per cent.

Other specialized facilities have been established in the Charleston Medical University Hospital including cardiovascular, peripheral vascular, psychiatric, speech and hearing and amputee clinics. The Department has provided a liaison officer between all state rehabilitation offices and the University Medical Hospital. This person also serves as full-time coordinator of all rehabilitation services in the University Hospital. Rehabilitation has, in addition to establishing facilities in the Greenville General Hospital, placed a coordinator and two counselors in the hospital to work with the patients. There is also a full-time counselor and a vocational evaluation facility at Marshall Pickens Hospital in Greenville, and a counselor is assigned to the new Richland Memorial Hospital in Columbia.

STEPS TO REHABILITATION

There are seven basic steps in the process of rehabilitation, each performing a vital function in changing the client from a burden on society to a useful and productive citizen.

Diagnostic Services—Through comprehensive procedures, an evaluation of the client's medical, social, psychological and vocational needs can be determined.

Counseling and Guidance—Counseling is a continuous service provided all clients throughout the entire rehabilitation process. The counselor develops, coordinates and integrates services according to the individual needs of his client, his interests and aptitudes and the employment outlook in his community.

Physical Restoration—Medical, surgical, dental, or psychiatric treatment and hospitalization are given when needed to restore the disabled person to the best possible physical and mental condition. Many times, the handicap is completely removed by treatment.

Artificial Appliances—Limbs, glasses, hearing aids and other kinds of artificial aids are provided when needed. This service is based on financial need.

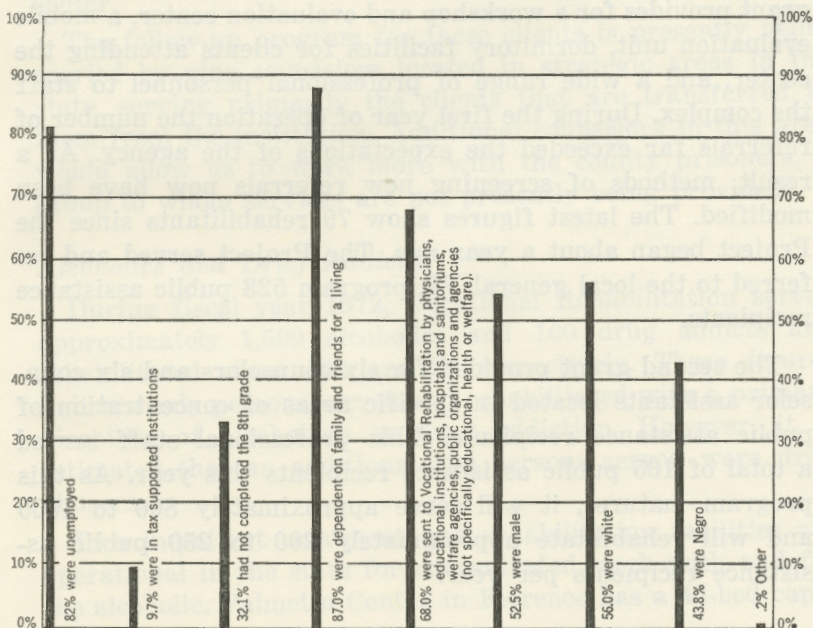
Training—The disabled person has a much better chance of getting a job if he has a work skill; therefore, many disabled are trained or retrained in skills that they can perform despite their physical condition. Necessary maintenance, transportation and supplies are based on financial need.

Placement—No client is considered rehabilitated until he is placed in a job suited to his vocational and physical ability . . . this is the goal of all rehabilitation services. For many disabled women the goal is being able to efficiently perform the important task of making a home. Not all clients require all services, but professional counseling, evaluation and guidance are provided ALL clients in order that they may have the opportunity to achieve their maximum potential.

Follow-Up—Every client receives follow-up to insure that his rehabilitation is successful and that both he and his employer are satisfied.

Percentiles

At the time of referral, of the 10,850 handicapped persons rehabilitated by Vocational Rehabilitation in South Carolina last year:



DISABILITIES

Rehabilitation of the handicapped has paid off as the disabled person becomes productive. Services provided by the Vocational Rehabilitation Department are extended to persons afflicted with mental illness, mental retardation, orthopedic deformity, digestive system disorders, genito-urinary system disorders, heart and circulatory conditions, speech and hearing impairments, visual impairments, allergy, endocrine disorders, absence of limbs, respiratory diseases, cancer, blood disease, epilepsy and other disabling conditions.

PROGRAM AREAS:

Disabled Public Assistance Recipients

A written agreement with the Department of Social Services has produced good results. However, during the past year efforts have been initiated to drastically increase the number of public assistance recipient referrals and in turn the number to be served and rehabilitated. Two Expansion Grants have been established. One grant is designed to serve a predominantly rural area of the state, Waltherboro. This grant provides for a workshop and evaluation center, a mobile evaluation unit, dormitory facilities for clients attending the center, and a wide range of professional personnel to staff the complex. During the first year of operation the number of referrals far exceeded the expectations of the agency. As a result, methods of screening new referrals now have been modified. The latest figures show 79 rehabilitants since the Project began about a year ago. The Project served and referred to the local general VR program 528 public assistance recipients.

The second grant provided for six counselors and six counselor assistants located in specific areas of concentration of public assistance recipients. This professional staff served a total of 165 public assistance recipients this year. As this program matures, it will serve approximately 800 to 1000 and will rehabilitate approximately 200 to 250 public assistance recipients per year.

Disabled Public Offenders

The Department is currently serving about 3,500 public offenders per year and rehabilitating about 900 per year. We are currently working with the public offender within the institution and providing follow-up counseling, evaluation, and placement in the community.

The Department recognizes that the current figures represent only a small number of disabled public offenders who are eligible for Vocational Rehabilitation services. Experience suggests that Vocational Rehabilitation become more involved at the pre-sentence and pre-release level. At the pre-sentence level we could become involved with the offender who is not sentenced to one of the correctional institutions. A great number of these people could benefit from Vocational Rehabilitation services.

At present, the Department of Corrections has five work release centers and two pre-release centers. Vocational Rehabilitation should be included within these centers and for additional follow-up services after the clients leave the institution. Vocational Rehabilitation's involvement would consist of at least one counselor and clerical assistant in each center.

The follow-up program for these clients is presently being carried by nine counselors located in strategic areas in the state, serving primarily the clients that are transferred to them from the institution. Additional counselors in this area would allow us to work more with the county prisoners, a group to whom services are not presently being provided.

Alcoholics and Drug Addicts

During fiscal year 1972, Vocational Rehabilitation served approximately 1,500 alcoholics and 100 drug addicts and rehabilitated about 500 and 20 respectively. These figures indicate only persons served and rehabilitated with a primary disability of alcoholism or drug addiction. However, it is estimated that an additional 800 persons served were drug abusers.

Two in-patient treatment and rehabilitation facilities are operational in the state for concentrated work with and for the alcoholic. Palmetto Center in Florence has a 48-bed capa-

city and Holmesview in Greenville has a 22-bed capacity. During the year approximately 675 alcoholics will be admitted to these two facilities. These facilities support the referring field counselors who remain responsible for follow-up services when these people return to their home communities. Currently we have several full-time counselors for alcoholics, with alcoholics in other areas served by general counselors.

Drug addicts are also being served by our general counselors and specialized counselors for the mentally ill. The State of South Carolina has constructed a diagnostic, treatment and rehabilitation center for alcoholics and drug addicts. The Center is used for voluntary and involuntary patients.

Mentally Ill

During the last fiscal year a total of 2,826 mentally ill were rehabilitated. This represented 26.1 percent of the total number of cases rehabilitated. This classification category includes psychotic, psychoneurotic, alcoholic, drug addicts, and those with behavioral disorders. The Department has long worked with the State Mental Hospitals in an effort to reach and serve those cases in the institution that are potential rehabilitants. The rehabilitation facility staff consists of approximately ten counselors. In addition six counselors are located in area offices throughout the state to serve only the mentally ill. This Department also has an excellent working relationship with the South Carolina Mental Health Commission and our counselors work cooperatively with various local Mental Health Centers.

Mentally Retarded

During fiscal year 1972, 2,159 mentally retarded clients were rehabilitated. This represented 19.9 percent of the total cases rehabilitated. A steady increase in the number of these cases being served has been witnessed over the past ten years. Methods of screening these referrals are becoming increasingly sophisticated and the counseling staff is learning a variety of techniques in testing and evaluating this type case. Community facilities allow excellent opportunities to provide services to this group and to better evaluate vocational potential. Based on experience, it has been learned that personal adjustment service is much needed in rehabili-

tating the average retardate. It is felt that the number of referrals in this area will continue to grow steadily as it has in the past.

The Deaf and Hard of Hearing

During the past fiscal year, a total of 380 with hearing impairments were rehabilitated. This was 3.5 percent of the total number rehabilitated. Referrals are received from all areas, from all age groups. It is likely that as services expand into the school programs and into the geriatric group, that more cases to be served will be forthcoming. The Department has an outstanding program of services on the campus of the State School for the Deaf in Spartanburg. Complete rehabilitation services are available which include medical, psychological, and vocational evaluation as well as job placement. Each year this school graduates from 25 to 35 deaf students who have received Vocational Rehabilitation services.

Visually Impaired

During the last fiscal year, a total of 471 visually handicapped persons were rehabilitated. This number accounted for 4.4% of the total number rehabilitated. As the Agency expands its program of services in the public schools, more referrals are expected to be received. It is likely that the present number of cases being served in this area can be doubled within the next few years. The screening process for detecting such handicapping conditions will become more sophisticated.

Amputation and Orthopedics

The Department has organized amputee clinics in five hospitals throughout the state. All amputee clients are requested to be fitted under the supervision of the amputee clinic team. In these facilities, clients are provided gait training and other required therapy which enables them to receive better service. Last year a total of 216 amputees were closed as rehabilitated. Approximately 75 to 100 clients are receiving services in the five amputee clinics at any given time. 1,226 persons with orthopedic impairments were closed as rehabilitated in the last fiscal year. This represents approximately 11 percent of the total cases rehabilitated. Fifty percent of

these cases acquired their handicapping conditions as the results of accidents.

Epilepsy

A total of 92 epileptics were rehabilitated in the fiscal year 1972. Those clients requiring physical restoration services have proven so expensive that the average counselor finds it impossible to serve a great number of cases. Numerous referrals are received but because of the financial situation they must be screened carefully.

Speech Impairments

During the fiscal year 1972, 65 cases were rehabilitated. It is reasonable to expect that if the services are expanded in the school area more referrals will be served. It is anticipated that additional speech and hearing centers will be established. At present there are twelve such centers.

Digestive System

One thousand and thirty-eight such cases were rehabilitated in fiscal year 1972. This represents approximately 10.4 percent of the total. The leading factor in this area of services is the rapidly rising cost of medical care.

All Other Disabilities

There appears to be no limit to the number of potential referrals in the "all other disabling disabilities" category. Screening teams are used in many situations. No case is denied without such screening.

Cooperative Vocational Rehabilitation - Public School and Youth Programs

The South Carolina Vocational Rehabilitation Department, the State Department of Education, and 22 local high school administrative units provided comprehensive programs of services to 3800 handicapped students of secondary school age during the year 1972. The purpose of the programs was to identify and serve mentally and physically handicapped adolescents who met the criteria and who had the potential for successful rehabilitation. The Department also cooperated

with the South Carolina Board of Juvenile Corrections and the Family Courts in developing similar programs. Vocational Rehabilitation provided services not being provided through the regular existing programs and without the assistance of Vocational Rehabilitation providing them, the handicapped would be denied the opportunities to develop work potential. There are approximately 20,000 pupils in the high schools throughout the state who could benefit from such programs.

A large number of handicapped students, including the socially and culturally disadvantaged drop out of school before they reach a training state or employment readiness. The programs are designed to keep these students in school and reduce the dropout figures. This reduces the possibility of delinquency among this group. Most of these students could be made into productive citizens.

The Department has also cooperated with the Family Court in developing a program of services for juvenile delinquents in five large metropolitan areas. The services are intended to assist the Courts in reducing the number of commitments to the Juvenile Correction Center. The results have been remarkable and judges in other areas have requested similar projects.

Beneficiary Rehabilitation Program (Trust Fund)

The South Carolina Vocational Rehabilitation Department has made continuous progress in serving the Social Security Disability Beneficiary since the inception of the Trust Fund Program in 1965. This program was established to assist the person who has been approved for Social Security Benefits. The rehabilitation counselors work only with Social Security Beneficiaries. A person is considered disabled if he has had a severe impairment that prevents work and has lasted or is expected to last for 12 months or longer. The Social Security Disability Beneficiary does not have to meet an economic need requirement to receive help. Disability payments for beneficiaries will continue during rehabilitation. Benefits stop only after the beneficiary shows he can do substantial gainful work, recovers, or is no longer disabled. When he returns to work, the decision of whether it is gainful employment may not be made until you have worked in nine separate months. A fractional part of a month is counted as

a whole month. Benefits will continue during this time. This nine month deferment is known as the "trial work period" and provides a chance to determine if a person will be able to continue to work.

Disability Determination Division

The Disability Determination Division has the responsibility (under the provisions of the 1954 Social Security Act) for determining eligibility for disability benefits to qualified individuals covered by social security insurance. During the fiscal year 1971-72 there were 7,393 claims allowed and 9,122 claims denied.

Simultaneous development is a new procedure which was implemented in South Carolina in fiscal year 1970-71. It means that the Division has the main responsibility for assisting claimants in obtaining medical evidence to support their claim for benefits. Prior to this, the Social Security District Offices had this responsibility.

Evidence supports the effectiveness of this procedure with both the medical profession and claimants. The medical expertise of the Division allows the elimination of extraneous information forming requests that pertain only to the evidence needed to support a claim.

The responsibility of the Division is to assist claimants with their medical development. There is no change in the claimant's responsibility to furnish initial medical or non-medical evidence in support of his claim. The claimant, not the government, must assume the responsibility for any charge made by the medical sources for the initial report.

Eligibility is determined by rehabilitation disability examiners and medical specialists who staff the Division. They secure all medical evidence and further develop non-medical evidence, if necessary, and either allow or deny the application on the basis of whether the applicant's disability makes him unable to engage in any substantial activity.

Last year there were 53,330 disabled workers and dependents receiving benefits for an average monthly payroll of \$4,764,265. 29,647 beneficiaries were disabled workers, 5,669 were wives and husbands as dependents of disabled workers and, 18,014 were dependent and disabled children.

All applicants are evaluated for rehabilitation potential. When it seems likely that the applicant could be made able to work again, he is referred to the vocational rehabilitation counselors for services. In 1971-72, of the persons referred to vocational rehabilitation counselors by the Disability Determination Division, 361 were rehabilitated.

REHABILITATION FACILITIES

The Department has developed an extensive system of state-operated rehabilitation facilities covering most sections of the state. These include evaluation and training facilities in the state institutions for the mentally ill, the mentally retarded, public offenders, the deaf, the tuberculous, the alcoholic; diagnostic and treatment facilities at the Medical University Hospital; twelve workshop facilities; several evaluation facilities; two mobile evaluation units; speech and hearing facilities; cardio-vascular, spinal cord and other orthopedic disability evaluation and treatment facilities in a general hospital; and special projects for the disadvantaged handicapped in two of the model city and poverty areas of the state. The Department served 19,085 persons in facilities last year.

There are twenty-two Vocational Rehabilitation evaluation and workshop facilities in South Carolina located in Aiken, Anderson, Charleston, Columbia, Florence, Greenville, Greenwood, Orangeburg, Rock Hill, Spartanburg, and Sumter.

The Department has had the latitude and freedom to go and obtain reciprocal agreements with many of the state agencies such as the Employment Security Commission, Department of Social Services, Department of Mental Health, Department of Mental Retardation, Department of Corrections, Department of Youth Services, Veterans Administration, OEO, CEP and many others. Services have been improved by setting up specialized facilities in cooperation with public and private groups and organizations. Coordinated services in special facilities are considered to be one of the main keys to enabling thousands of severely disabled to be released from economic imprisonment.

Cooperative programs are presently established in thirteen statewide facilities serving the handicapped and located in various areas of the state. These facilities include Cedar

Spring Facility for the Deaf in Spartanburg, Medical University Hospital Facilities in Charleston, Whitten Village, State Hospital, Midlands Rehabilitation Facility, the State Sanatorium, Public Offender Facility, Palmetto Alcoholic Center, Youthful Public Offender Facility, Opportunity School, the Habilitation Project for the Mentally Retarded in Summerville, Drug Addiction Center in Columbia, and Crafts-Farrow Hospital Rehabilitation Facility in Columbia.

THE COST OF REHABILITATION

Supporting unemployed disabled persons is a continuous cost year after year. For instance, the average patient at the South Carolina State Hospital costs the institution \$3,491 per year. Yet the cost for rehabilitation per client was only \$1,426 last year.

EARNINGS AND OCCUPATIONS OF THE REHABILITANT

The 10,850 rehabilitants of last year increased their annual rate of earning from \$5,453,760.00 before rehabilitation to \$33,292,428.00 after rehabilitation. This is a net increase of 510% after rehabilitation. These rehabilitants are working at various jobs now. 563 rehabilitants are working in farming and related occupations and 1,472 are working in special occupations. 2,618 are in service occupations, 4,530 in industrial occupations, 1,063 in clerical and sales and 604 in professional, technical and managerial occupations.

ANNUAL EXPENSE

The total annual expenditures by the Vocational Rehabilitation Department to its clients last year was \$15,473,589. It takes only four years for the rehabilitant to repay the state and federal governments the cost of rehabilitation through annual taxes. The 10,850 rehabilitants last year will pay an estimated \$2,715,364 in federal income tax, \$378,649 in state income tax and \$736,841 in state sales tax.

Of the total annual expenditures, 96.5%, or \$14,930,828 went for case services. This involves counseling and placement of the client. This money was used for professional and clerical salaries, travel, communications, supplies, rent, office maintenance and equipment. The remainder of the money,

\$542,761, or 3.5% was spent on administration in Vocational Rehabilitation. This includes administrative and clerical salaries, travel, communications, supplies, public information, rent, and office maintenance and equipment. The case services monies are also spent on diagnostic procedures, surgery, treatment, prosthetic appliances, hospitalization and convalescent care, training, training materials, maintenance and transportation, tools, and equipment and licenses. These figures do not include expenditures for the Disability Determination Division program in South Carolina during 1971-72.

A comparison of expenditures for Fiscal Years 1970-71 and 1971-72 shows:

	FY 1970-71	FY 1971-72
Administration	3.6% or \$ 506,854	3.5% or \$ 542,761
General Rehabilitation	58.2% or \$8,164,372	56.8% or \$8,786,569
Evaluation & Training		
Facilities	17.5% or \$2,463,996	16.7% or \$2,583,211
Alcoholic Center	2.7% or \$ 375,451	2.5% or \$ 389,504
Cooperative Public		
School Programs	10.8% or \$1,516,430	10.9% or \$1,680,127
InterAgency Projects		
(Special Grants)	7.2% or \$1,012,538	9.6% or \$1,491,417
Total Expenditures		
(Rehabilitation)	\$14,039,641	\$15,473,589
Disability Determination		
Division	974,562	1,043,176
Grand Total Expenditures	\$15,014,203	\$16,516,765

FOLLOW-UP SURVEY OF REHABILITATED PERSONS

A follow-up study was conducted on a sample of 300 persons rehabilitated two years ago during 1969-70 to determine the lasting effect of rehabilitation services. Of the 300 rehabilitants studied: 87% were employed at the time of closure and 77% were still employed two to three years later; 68% remained on the same job or in the same type work; and 21% changed to a different type of work. Forty-three percent were earning the same wages as two years before whereas 44% were earning more than they were two years before with only 13% earning less than two years before. Of the 300, 86% expressed complete satisfaction with the services offered them by Vocational Rehabilitation, 13% were fairly well satisfied, only 01% were dissatisfied.

ENABLING LEGISLATION PASSED DURING FISCAL YEAR 1971-72

An act to establish a mandatory program for education of handicapped children in public schools. (R. 1002, H. 1375)

An act to amend Section 71-285, Code of Laws of South Carolina, 1962, relating to unlawful disclosure of Vocational Rehabilitation records, so as to provide for disclosure upon written consent of applicant and recipient. (R. 1355, H. 2910)

An act to amend the Code of Laws of South Carolina, 1962, by adding Chapter 11 to Title 72, so as to establish a method of benefits payment to employees for second injuries; to establish a second injury fund and provide for its administration; to repeal Section 72-189 which relates to the use of amounts paid to the Industrial Commission under Section 72-165. (R. 1595, H. 2707)

An act to amend Sections 21-295 and 21-295.3, Code of Laws of South Carolina, 1962, as amended, relating to definitions concerning handicapped children and state aid for such children, so as to further provide therefore. (R. 1672, H. 3440)

To provide interpreters for the deaf in certain proceedings. (S. 796, R. 1780)

PUBLICATIONS BY THE VOCATIONAL REHABILITATION DEPARTMENT

Annual Report

A pictorial, graphic and factual review of each fiscal year

New Horizons, a newsletter

The Unfit Majority: A Research Study of the Rehabilitation of Selective Service Rejectees in South Carolina

Rehabilitating Military Dependents: A Project to Demonstrate the Value of Establishing a Program of Rehabilitation Services in a Military Base Community

Rehabilitating Public Offenders

Rehabilitation, The Third Phase of Medicine

Has Disability Got You Down?

Independence for S.C.'s Handicapped Citizens

Peripheral Vascular Rehabilitation Facility

Cardio-Vascular Facility, Work Classification Unit

Epilepsy: Where Do I Turn?

Is Alcoholism Your Problem?

Establishing an Operations Research Program in a State
V. R. Agency

